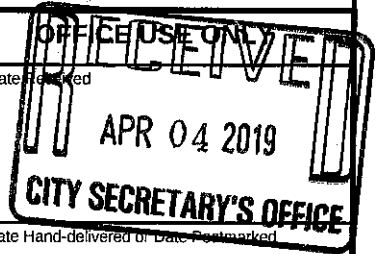


CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 17
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mark		
	NICKNAME LAST SUFFIX Skinner		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 4100 Oxford Ct Colleyville, TX 76034		Date Hand-delivered or Date Postmarked
			Receipt # Amount
			Date Processed
			Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Karen		
	NICKNAME LAST SUFFIX Deakin		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 4828 Lakeside Dr Colleyville, TX 76034		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (817) 399-9885		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month Day Year Month Day Year 01/01/2019 THROUGH 03/25/2019		
10 ELECTION	ELECTION DATE Month Day Year 05/04/2019		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
11 OFFICE	OFFICE HELD (if any) None		12 OFFICE SOUGHT (if known) Colleyville Mayor

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

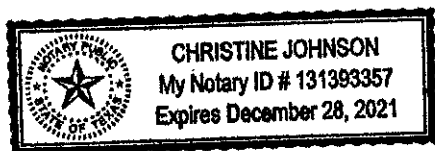
2 of 17

13 C / OH NAME Skinner, Mark	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE	COMMITTEE NAME
	<input type="checkbox"/> GENERAL	
	<input type="checkbox"/> SPECIFIC	
		COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME	
	COMMITTEE CAMPAIGN TREASURER ADDRESS	

16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 440.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 9,090.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 6,345.30
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 3,744.70
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1,000.00

17 AFFADAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

R. Mark Skinner
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Mark Skinner, this the 4th day of April, 2019, to certify which, witness my hand and seal of office.

Christine Johnson
Signature of officer administering

Christine Johnson
Printed name of officer administering

Mgmt Asst.
Title of officer administering oath

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

3 of 17

18 FILER NAME

Skinner, Mark

19 Filer ID**20 SCHEDULE SUBTOTALS**

NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 9,090.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 1,000.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 6,345.30
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 1/5 Rpt: 4/17

2 FILER NAME

Skinner, Mark

3 Filer ID

4 Date
02/14/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)
Atherton, Kay & Jay

7 Amount of Contribution (\$)
\$1,000.00

6 Contributor address; City; State; Zip Code
7207 JOHN MCCAIN RD
COLLEYVILLE, TX 76034

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
02/15/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Baggett, Malika

Amount of Contribution (\$)
\$300.00

Contributor address; City; State; Zip Code
621 CANTERBURY ST
EULESS, TX 76039

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/24/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Calvert, Jimmy

Amount of Contribution (\$)
\$1,000.00

Contributor address; City; State; Zip Code
1704 OAK KNOLL DR
COLLEYVILLE, TX 76034

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/14/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Chatham, Keith

Amount of Contribution (\$)
\$500.00

Contributor address; City; State; Zip Code
4413 BOWMAN DR
COLLEYVILLE, TX 76034

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/20/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Davis, Leslie

Amount of Contribution (\$)
\$500.00

Contributor address; City; State; Zip Code
101 W MILL VALLEY DR
COLLEYVILLE, TX 76034

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 2/5 Rpt: 5/17

2 FILER NAME
Skinner, Mark

3 Filer ID

4 Date
03/23/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)
Gilby, Lee H

7 Amount of Contribution (\$)
\$100.00

6 Contributor address; City; State; Zip Code
P.O. BOX 207

BURTON, TX 77835

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
02/20/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Hart, Tom

Amount of Contribution (\$)
\$100.00

Contributor address; City; State; Zip Code
1717 AVONDALE DR

COLLEYVILLE, TX 76034

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/25/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Holloway, Carolyn

Amount of Contribution (\$)
\$2,000.00

Contributor address; City; State; Zip Code
109 STOCKMAN TRAIL

GEORGETOWN, TX 78633

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/19/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Howe, Mark

Amount of Contribution (\$)
\$100.00

Contributor address; City; State; Zip Code
3100 CARISBROOKE CT

COLLEYVILLE, TX 76034

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/07/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Jackson, Jim & Jessica

Amount of Contribution (\$)
\$100.00

Contributor address; City; State; Zip Code
3102 SCARBOROUGH LN W

COLLEYVILLE, TX 76034

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 3/5 Rpt: 6/17

2 FILER NAME

Skinner, Mark

3 Filer ID

4 Date
03/06/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)
Johnson, Larry & Alison

6 Contributor address; City; State; Zip Code
3408 LANGLEY HILL LN

COLLEYVILLE, TX 76034

7 Amount of Contribution (\$)
\$250.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
02/12/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Lee, Roger

Contributor address; City; State; Zip Code
4901 BELDON TRL

COLLEYVILLE, TX 76034

Amount of Contribution (\$)
\$500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/14/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Makens, James

Contributor address; City; State; Zip Code
1312 SOMERSET CT

COLLEYVILLE, TX 76034

Amount of Contribution (\$)
\$250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/25/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Mastagni, Danee

Contributor address; City; State; Zip Code
4108 PEMBROOKE PKWY W

COLLEYVILLE, TX 76034

Amount of Contribution (\$)
\$250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/19/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
McConnell, Melissa

Contributor address; City; State; Zip Code
1717 AVONDALE DR

COLLEYVILLE, TX 76034

Amount of Contribution (\$)
\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 4/5 Rpt: 7/17

2 FILER NAME

Skinner, Mark

3 Filer ID

4 Date
02/25/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)
Meek, Karl

6 Contributor address; City; State; Zip Code
6204 ROCK DOVE CIRCLE

COLLEYVILLE, TX 76034

7 Amount of Contribution (\$)
\$250.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
03/09/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Miller, Louis

Contributor address; City; State; Zip Code
6404 TALBOT TRAIL

COLLEYVILLE, TX 76034

Amount of Contribution (\$)
\$250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/24/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Skinner, Jon & Rebecca

Contributor address; City; State; Zip Code
5200 TOPAZ COURT

FLOWER MOUND, TX 75022

Amount of Contribution (\$)
\$500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/01/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Skinner, Mary Ann

Contributor address; City; State; Zip Code
4100 OXFORD COURT

COLLEYVILLE, TX 76034

Amount of Contribution (\$)
\$300.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/23/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Skinner, Valerie

Contributor address; City; State; Zip Code
4100 OXFORD CT

COLLEYVILLE, TX 76034

Amount of Contribution (\$)
\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 5/5 Rpt: 8/17

2 FILER NAME
Skinner, Mark

3 Filer ID

4 Date
02/22/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)
Spivey, Christy

7 Amount of Contribution (\$)
\$100.00

6 Contributor address; City; State; Zip Code
3907 MARTIN PKWY
COLLEYVILLE, TX 76034

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
03/16/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Vallhonrat, Paul

Amount of Contribution (\$)
\$100.00

Contributor address; City; State; Zip Code
6510 CONNIE LN
COLLEYVILLE, TX 76034

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

LOANS**SCHEDULE E****The Instruction Guide explains how to complete this form.****1** Total pages Schedule E:
Sch: 1/1 Rpt: 9/17**2** FILER NAME
Skinner, Mark**3** Filer ID**4** TOTAL OF UNITEMIZED LOANS**\$****5** Date of loan
02/12/2019**7** Name of lender ☐ out-of-state PAC (ID#: _____)
Skinner, Mark (Mr.)**9** Loan Amount (\$)
\$1,000.00**6** Is lender a
financial
institution?
No**8** Lender address; City; State; Zip Code
4100 Oxford Ct

Colleyville, TX 76034**10** Interest Rate**11** Maturity Date**12** Principal occupation / Job title (See Instructions)**13** Employer (See Instructions)**14** Description of Collateral
☒ None**15** Check if personal funds were deposited into political account
(See Instructions)
☒**16** GUARANTOR
INFORMATION☒ not applicable**17** Name of guarantor**19** Amount Guaranteed (\$)**18** Guarantor address; City; State; Zip Code**20** Principal occupation**21** Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/8 Rpt: 10/17		2 FILER NAME Skinner, Mark		3 Filer ID	
4 Date 02/15/2019		5 Payee name 4over			
6 Amount (\$) \$28.58		7 Payee address; City; State; Zip Code 5900 San Fernando Rd Glendale, CA 91202			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business Cards	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/11/2019		Payee name Birdwell, Ann-Marie			
Amount (\$) \$300.00		Payee address; City; State; Zip Code 10105 Locksley Drive Benbrook, TX 76126			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social Media Consulting	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/19/2019		Payee name CampaignShortCuts			
Amount (\$) \$498.83		Payee address; City; State; Zip Code 571 Austin Ct Coppell, TX 75019			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet Domain Registration and Communications Rental Subscription	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/8 Rpt: 11/17		2 FILER NAME Skinner, Mark		3 Filer ID	
4 Date 03/13/2019		5 Payee name CampaignShortCuts			
6 Amount (\$) \$571.89		7 Payee address; City; State; Zip Code 571 Austin Ct Coppell, TX 75019			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Application Rental	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/13/2019		Payee name CampaignShortCuts			
Amount (\$) \$1,082.50		Payee address; City; State; Zip Code 571 Austin Ct Coppell, TX 75019			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Development	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/19/2019		Payee name Checks In the Mail			
Amount (\$) \$19.03		Payee address; City; State; Zip Code 2435 Goodwin Lane New Braunfels, TX 78135			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Checks	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/8 Rpt: 12/17		2 FILER NAME Skinner, Mark		3 Filer ID	
4 Date 03/04/2019		5 Payee name Designer Graphics			
6 Amount (\$) \$3,058.71		7 Payee address; City; State; Zip Code 12404 Hwy 155 South Tyler, TX 75703			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard and Large Signs	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/15/2019		Payee name Lowe's			
Amount (\$) \$31.26		Payee address; City; State; Zip Code 3000 State Highway 121 Euless, TX 76039			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cable Ties for Signs	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/22/2019		Payee name Lowe's			
Amount (\$) \$27.41		Payee address; City; State; Zip Code 3000 State Highway 121 Euless, TX 76039			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cable Ties for Signs	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/8 Rpt: 13/17		2 FILER NAME Skinner, Mark		3 Filer ID	
4 Date 03/13/2019		5 Payee name Shirt-ology			
6 Amount (\$) \$388.35		7 Payee address; City; State; Zip Code 1401 Mary Court Keller, TX 76262			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense T-shirts	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/19/2019		Payee name Stripe.com			
Amount (\$) \$3.20		Payee address; City; State; Zip Code 3180 18th St San Francisco, CA 94110			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Daily Online Donation Collection Fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/20/2019		Payee name Stripe.com			
Amount (\$) \$19.75		Payee address; City; State; Zip Code 3180 18th St San Francisco, CA 94110			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Daily Online Donation Collection Fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/8 Rpt: 14/17		2 FILER NAME Skinner, Mark		3 Filer ID	
4 Date 02/25/2019		5 Payee name Stripe.com			
6 Amount (\$) \$7.55		7 Payee address; City; State; Zip Code 3180 18th St San Francisco, CA 94110			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Daily Online Donation Collection Fee	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 03/03/2019		Candidate/Officeholder name Payee name Stripe.com			
Amount (\$) \$1.75		Payee address; City; State; Zip Code 3180 18th St San Francisco, CA 94110			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Daily Online Donation Collection Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 03/06/2019		Candidate/Officeholder name Payee name Stripe.com			
Amount (\$) \$9.01		Payee address; City; State; Zip Code 3180 18th St San Francisco, CA 94110			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Daily Online Donation Collection Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate/Officeholder name Office sought Office held					

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/8 Rpt: 15/17		2 FILER NAME Skinner, Mark		3 Filer ID	
4 Date 03/07/2019		5 Payee name Stripe.com			
6 Amount (\$) \$3.20		7 Payee address; City; State; Zip Code 3180 18th St San Francisco, CA 94110			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Daily Online Donation Collection Fee	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate/Officeholder name		Office sought		Office held	
Date 03/09/2019		Payee name Stripe.com			
Amount (\$) \$7.55		Payee address; City; State; Zip Code 3180 18th St San Francisco, CA 94110			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Daily Online Donation Collection Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate/Officeholder name		Office sought		Office held	
Date 03/16/2019		Payee name Stripe.com			
Amount (\$) \$3.20		Payee address; City; State; Zip Code 3180 18th St San Francisco, CA 94110			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Daily Online Donation Collection Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate/Officeholder name		Office sought		Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/8 Rpt: 16/17		2 FILER NAME Skinner, Mark		3 Filer ID	
4 Date 03/23/2019		5 Payee name Stripe.com			
6 Amount (\$) \$3.20		7 Payee address; City; State; Zip Code 3180 18th St San Francisco, CA 94110			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Daily Online Donation Collection Fee	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 03/24/2019		Payee name Stripe.com			
Amount (\$) \$29.30		Payee address; City; State; Zip Code 3180 18th St San Francisco, CA 94110			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Daily Online Donation Collection Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 02/18/2019		Payee name Stripe.com			
Amount (\$) \$1.03		Payee address; City; State; Zip Code 3180 18th St San Francisco, CA 94110			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Daily Online Donation Collection Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/8 Rpt: 17/17	2 FILER NAME Skinner, Mark	3 Filer ID
4 Date 02/16/2019	5 Payee name Water2Wine Design	
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 168 Weldon Church Road Bernice, LA 71222	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Graphics
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held